



Express Mail Label No.: EM 066 614 494 US  
Date of Deposit: June 25, 2008

Attorney Docket No. 27585-017

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Flautt et al.  
Serial No.: 10/696,338  
Filed: October 23, 2003  
For: Superabsorbent Water-Resistant Coatings  
Fiber Reinforced Articles  
Reel No. Ref: 07/22/2008 CKHLOK 0008351100  
DIN: 500311 Name/Number: 60975068  
FC: 9204 \$2230.00 CR  
Examiner: Dr. K.C. Egwim  
Art Unit: 1796

Attention: Office of Petitions  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**PETITION FOR EXTENSION OF TIME  
TO RESPOND TO OFFICE ACTION**

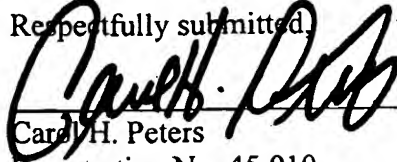
Sir:

Applicants submit herewith a petition for five months extension of time to extend the time to file a response required in the above-identified application on or before February 14, 2007. Applicants enclose herewith a check in the amount of \$ 2,230 for the requisite fee for five months extension of time.

If the enclosed check is insufficient, the Commissioner is hereby authorized to charge the balance required to the account of the undersigned, Deposit Account No. 50-0311, referencing Attorney Docket No. 27585-017. A duplicate copy of this Petition is enclosed for this purpose.

Should the Office have any questions concerning this petition for one-month extension of time, the Office is invited to telephone the undersigned.

Respectfully submitted,

  
Cary H. Peters  
Registration No. 45,010  
MINTZ, LEVIN, COHN, FERRIS  
GLOVSKY and POPEO, P.C.  
Attorneys for Applicant(s)  
One Financial Center  
Boston, MA 02111  
Telephone: 617/348-4914  
Facsimile: 617/542-2241  
email: [cpeters@mintz.com](mailto:cpeters@mintz.com)

06/30/2008 LTRUONG 00000032 10696338

03 FC:1255

2230.00 0P

Date: June 25, 2008

Adjustment date: 07/22/2008 CKHLOK  
06/30/2008 LTRUONG 00000032 10696338  
03 FC:1255 -2230.00 0P

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>7/21/08</u>		2 Serial/Patent # <u>10696338</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
<input checked="" type="checkbox"/>	Extension of Time	—	6/25/08	\$ 2230.00
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
		7 TOTAL AMOUNT OF REFUND		\$ 2230.00
10 REASON:		8 TO BE REFUNDED BY:		
	Overpayment	<input checked="" type="checkbox"/> Treasury Check		
	Duplicate Payment	<input checked="" type="checkbox"/> Credit Deposit A/C #: 9		
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	<div style="border: 1px solid black; display: inline-block; padding: 2px;"> 5000311 </div>		
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Liana Walsh</u>		TITLE: <u>Pet Examiner</u>		
SIGNATURE: <u>[Signature]</u>		PHONE: <u>23204</u>		
OFFICE: _____				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>[Signature]</u>		DATE: <u>7/22/08</u>		

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*